PTO/SB/17 (12-04)

Approved for use through 07/31/2006. OMB 0651-0032 U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE aperwork Reduction Act of 1995 no persons are required to respond to a collection of information unless it displays a valid OMB control number Complete if Known Effective on 12/08/2004. oursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818). Application Number 10/621,619 TRANSMITTAL Filing Date July 18, 2003 Takanobu ICHIHARA First Named Inventor For FY 2005 **Examiner Name** Diem T. Tran Applicant claims small entity status. See 37 CFR 1.27 Art Unit 3748 TOTAL AMOUNT OF PAYMENT (\$) 1420.00 Attorney Docket No. 056208.52589US METHOD OF PAYMENT (check all that apply) None Check | Credit Card | Money Order Other (please identify): Deposit Account Deposit Account Number: 05-1323 Deposit Account Name: Crowell & Moring LLP For the above-identified deposit account, the Director is hereby authorized to: (check all that apply) Charge fee(s) indicated below, except for the filing fee Charge fee(s) indicated below Charge any additional fee(s) or underpayments of fee(s) Credit any overpayments under 37 CFR 1.16 and 1.17 WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038. **FEE CALCULATION** 1. BASIC FILING, SEARCH, AND EXAMINATION FEES **FILING FEES** SEARCH FEES **EXAMINATION FEES Small Entity Small Entity** Small Entity Application Type Fee (\$) Fee (\$) Fee (\$) Fee (\$) Fees Paid (\$) Fee (\$) Fee (\$) Utility 300 150 500 250 200 100 Design 200 100 100 50 130 65 Plant 200 100 300 150 160 80 Reissue 300 150 500 250 600 300 Provisional 200 100 0 0 0 2. EXCESS CLAIM FEES **Small Entity Fee Description** Fee (\$) Fee (\$) Each claim over 20 or, for Reissues, each claim over 20 and more than in the original patent 50 25 Each independent claim over 3 or, for Reissues, each independent claim more than in the original patent 200 100 Multiple dependent claims 180 360 **Total Claims** Extra Claims Fee Paid (\$) Multiple Dependent Claims Fee (\$) 10 - 20 or HP = 0 Fee (\$) Fee Paid (\$) HP = highest number of total claims paid for, if greater than 20 Indep. Claims **Extra Claims** Fee Paid (\$) Fee (\$) 200 HP = highest number of independent claims paid for, if greater than 3 3. APPLICATION SIZE FEE If the specification and drawings exceed 100 sheets of paper, the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s). Number of each additional 50 or fraction thereof Fee (\$) Fee Paid (\$) (round up to a whole number) x 4. OTHER SHEET(S) Fee Paid (\$) Non-English Specification, \$130 fee (no small entity discount) Other: Petition for Extens 1020.00 SUBMITTED BY Registration No. Signature Telephone 202-624-2500

(Attorney/Agent) 32,390 Richard R. Diefendorf Name (Print/Type) Date August 8, 2005

This collection of information is required by 67 CFR 1/136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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